



Application Number	10/731,189
Filing Date	December 8, 2003
First Named Inventor	Smith, Scott J.
Art Unit	3653
Examiner Name	Kenneth W. Noland
Attorney Docket Number	020375-001810US

ENCLOSURES (Check all that apply)			
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences	
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)	
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information	
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter	
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard	
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund		
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____		
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD		
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Darin J. Gibby		
Date	March 24, 2005	Reg. No.	38,464

CERTIFICATE OF TRANSMISSION/MAILING			
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Typed or printed name	Connie Larson	Date	March 24, 2005

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Attorney Docket No.: 020375-001810US

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On March 24, 2005



TOWNSEND and TOWNSEND and CREW LLP

By: Connie Larson

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Scott J. Smith et al.

Application No.: 10/731,189

Filed: December 8, 2003

For: MAIL HANDLING EQUIPMENT
AND METHODS

Customer No.: 20350

Confirmation No. 4365

Examiner: Kenneth W. Noland

Technology Center/Art Unit: 3653

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed February 1, 2005, please enter the following amendments and remarks:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 6 of this paper.